

35.G1872D1



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

YOSHINORI TAKAHASHI

Application No.: 08/782817
09/503,482

Filed: February 14, 2000

For: INFORMATION PROCESSING
APPARATUS, INFORMATION
PROCESSING METHOD, AND
INFORMATION PROCESSING
SYSTEM

Examiner: D. Popovici

Group Art Unit: 2770

RECEIVED

APR 24 2000

Group 2700

Date: March 27, 2000

RECEIVED
MAR 29 2000
TC 2700 MAIL ROOM

Assistant Commissioner for Patents
Washington, D.C. 20231

PRELIMINARY AMENDMENT

Sir:

Prior to examination on the merits, please amend the
above-identified application as follows:

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APR 24 2000
TC 2700 MAIL ROOM

IN THE CLAIMS:

Please cancel Claim 1, without prejudice or
disclaimer of the subject matter presented therein.

Please add claims 45-53 as follows:

--45. An information processing apparatus
comprising:
a determination circuit adapted for determining a

Sub B
C1



GP- 2772

In re Application of:

YOSHINORI TAKAHASHI

Application No.: 08/782817
~~09/503,482~~

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For: INFORMATION PROCESSING APPARATUS,
INFORMATION PROCESSING METHOD, AND
INFORMATION PROCESSING SYSTEM

THE ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 9	MINUS	** 20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$39 \$78	\$0.00
Fee for Multiple Dependent claims \$130°/\$260						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Assistant Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant

Registration No. 28,296

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